

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IF NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>43</i>	<i>5/18/01</i>
FORMALITY REVIEW	<i>[Signature]</i>	<i>1020</i>	<i>06/19/01</i>
RESPONSE FORMALITY REVIEW	<i>H-5</i>	<i>866</i>	<i>10-25-01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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*8/06/19*